

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) An Accountable Miami-Dade
 Name
 (2) 2929 SW 3rd Avenue; Suite 220
 Address (number and street)
Miami, FL 33129
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1144031]

Submitted on:
 8/18/2017 15:39:36 (eastern)

Check here if address has changed

(3) ID Number: 1488

(4) Check appropriate box(es):

- Candidate Office Sought: _____
- Political Committee (PC)
- Electioneering Communications Org. (ECO) Check here if PC or ECO has disbanded
- Party Executive Committee (PTY) Check here if PTY has disbanded
- Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 6 / 1 / 2017 To 6 / 30 / 2017 Report Type: 17M06

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 0 . 00

Loans \$, , 0 . 00

Total Monetary \$, , 0 . 00

In-Kind \$, -6 , 300 . 22

(7) Expenditures This Report

Monetary Expenditures \$, , 0 . 00

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, , 0 . 00

(8) Other Distributions

\$, , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$, 342 , 047 . 87

(10) TOTAL Monetary Expenditures To Date

\$, 341 , 862 . 30

(11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:

(Type name) _____
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X _____
 Signature

(Type name) _____
 Candidate Chairperson (only for PC and PTY)

X _____
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name An Accountable Miami-Dade

(2) I.D. Number 1488

(3) Cover Period 6/1/2017 through 6/30/2017

(4) Page 1 of 0

| (5) Date | (7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code | (8) Purpose (add office sought if contribution to a candidate) | (9) Expenditure Type | (10) Amendment | (11) Amount |
|---------------------------|--|--|----------------------------|-------------------|----------------|
| (6) Sequence Number | | | | | |
| / / | | | | | |
| | | | | | |
| / / | | | | | |
| | | | | | |
| / / | | | | | |
| | | | | | |
| / / | | | | | |
| | | | | | |
| / / | | | | | |
| | | | | | |
| / / | | | | | |
| | | | | | |